

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D		2-10-00
O.I.P.E. CLASSIFIER		20	3/6
FORMALITY REVIEW		11531	4-7-00
RESPONSE FORMALITY REVIEW			5-1-00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim		Date			
Final	Original				
1	✓	1/5/00	h/15/04		
2	✓				
3	✓				
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Best Available Copy

If more than 150 claims or 10 actions  
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